

SONG-BROWN FAMILY PHYSICIAN TRAINING PROGRAM SITE VISIT EVALUATION REVIEW

FAMILY PRACTICE RESIDENCY PROGRAM: Ventura County Family Medical Center

Date of Site Visit: May 19, 2008

Site Review Staff: Manuela Lachica-Program Director and Melissa Omand-Program Analyst.

Names and Titles of Persons Interviewed: Dr. Thomas Dunlop, Program Director and Dr. Pawson, Interim Program Director as of 07/01/2008.

Site visit questions relate to the Song-Brown Health Care Workforce Training Act Standards for Family Practice Residency Programs, established by the California Healthcare Workforce Policy Commission, pursuant to Health and Safety Code 128200. Each training program standard is presented in italics:

- I. *Each Family Practice Residency Training Program approved for funding and contracted with under the Song-Brown Health Care Workforce Training Act (hereinafter “the Act”) shall, prior to the initiation of training and the transfer of State funds:*
 - A. *Meet the American Medical Association’s “Essentials for Residency Training in Family Practice”, and*
 - B. *Be approved by the Residency Review Committee on Family Practice of the American Medical Association, as documented in a formal letter of approval from the Residency Review Committee, or the Liaison Committee on Graduate Medical Education, and*
 - C. *Be provided by an accredited medical school or a teaching hospital which has programs or departments that recognize family practice as a major independent specialty, or*

For postgraduate osteopathic medical programs in family practice:

- A. *Be approved by the American Osteopathic Association (AOA) Council on Postdoctoral Training and meet requirements to ensure that Osteopathic Programs are comparable to programs specified above, and:*
- B. *Be accredited as an “Osteopathic Postdoctoral Training Institution” (OPTI) by the Bureau of Professional Education through the Council on Postdoctoral Training (COPT) and*
- C. *Meet C requirement above.*

The following questions relate to Section I of the Training Program Standards:

1. Has the residency program formally been approved by the Residency Review Committee on Family Practice [or, for Osteopathic Postdoctoral Training Institution programs, the equivalent body of the American Osteopathic Association]?

Yes ☒ No ☐

If yes, Full ☐ Probationary ☐

Year that the next accreditation site visit is expected: The program was site visited by the Residency Review Committee in October 2007, the Program Director feels the site visit went well and they are on schedule to make the May 2008 ACGME meeting regarding their accreditation status.

Concerns: _____

Has a site visit relating to your accreditation been conducted recently, whose results are not yet available? Yes ☒ No ☐

Comments: See above comments related to the RRC site visit.

2. Is the residency program operated by a medical school?

Yes ☐ No ☒

If yes, with which medical school? _____

3. Is the residency program operated by a teaching hospital that is affiliated with a medical school? Yes ☒ No ☐

If yes, with which medical school? It is a county program affiliated with the UCLA Medical School.

4. If the residency program is operated by a teaching hospital that has no current affiliation, is one being negotiated?

Yes ☐ No ☒ Not Applicable ☐

If yes, with which medical school? _____

Additional comments relating to compliance with Section I of the Standards (optional)

II. Each Family Practice Residency Training Program, or Post Graduate Osteopathic Medical Program in Family Practice, approved for funding under the Act shall include a component of training in medically underserved multi-cultural communities, lower socioeconomic neighborhoods, or rural communities, and shall be organized to prepare family physicians for service in such neighborhoods and communities.

The following questions relate to Section II of the Training Program Standards:

1. Does the program include a component of training in medically underserved multi-cultural communities, lower socioeconomic areas, or rural communities that is organized to prepare family physicians for service in such neighborhoods and communities? (Minimum standard requires that 15% of clinical training must be completed in areas of unmet need)

Yes ☒ No ☐ If no, provide comments: _____

2. Describe the location of the residency program's principal family health center?

Check which category(ies) apply(ies):

Medically underserved multicultural community ☒

Lower socioeconomic area ☒

Rural area ☐

None of the above ☐

3. Family health center street address and zipcode: Ventura County Medical Center
3291 Loma Vista Road, Ventura, Ca 93003.

FPC Patient Population: 60%-Latino Surname, 30%-Monolingual Spanish speaking, 5%-Black, and 5%-mix

FPC Payor Mix: 60-65% Medi-cal, 15% uninsured, and 12% Medi-Care.

For OSHPD staff use – geographic location of family health center:

Census tract: 0019.00 MSSA: 241c

4. Are all of the residency program's residents required to spend part of their three years in patient care in that location? Yes ☒ No ☐

Did the site review include a visit to the principal family health center?

Yes ☒ No ☐

5. List components of training (other than the family health center) required of all residents that meet the intent of Section II of the Training Program Standards (above):

Training Program Street Address and Zipcode:

For OSHPD staff use – geographic location of training component (other than family health center):

Census tract _____ MSSA _____

6. Describe the location of the residency program's training component (other than its principal family health center):

Medically underserved multicultural community

Yes ☒ No ☐

Lower socioeconomic neighborhood Yes

☒ No ☐

Rural area

Yes ☒ No ☐

The residency programs training component located in a medically underserved multi-cultural community/lower socioeconomic neighborhood would be the Ventura County Medical Center itself and its ambulatory clinics. The Piru Family Medical Clinic located in Piru, Ca fulfills the rural area training component as would the newly acquired (2005) Santa Paula Hospital located in Santa Paula, California. Both the Piru Family Medical Clinic and Santa Paula Hospital are located in rural MSSA 237.

7. Check all applicable categories that describe the training component:

Federally Qualified Health Center or Look-alike

Yes ☐ No ☐

Other community health center

Yes ☐ No ☐

Rural health clinic

Yes ☐ No ☐

Government-owned/operated facility Yes

☒ No ☐

Other (describe): All training is done within the county health system whether at the County Medical Center in Ventura, Santa Paula Hospital in Santa Paula or the counties satellite clinics that offer primary care services or its campus clinics that provide specialty care.

Additional comments relating to compliance with Section II of the Standards (optional)

III. Appropriate strategies shall be developed by each training institution receiving funds under the Act to encourage Family Physicians who are trained in the training program funded by the Act, to enter into practice in areas of unmet priority need for primary care family physicians within California as defined by the California Healthcare Workforce Policy Commission (hereinafter referred to as "areas of need"). Such strategies shall incorporate the following elements:

A. An established procedure to identify, recruit and match family practice residents who possess characteristics which would suggest a predisposition to practice in areas of need, and who express a commitment to serve in areas of need.

- B. *An established counseling and placement program designed to encourage training program graduates to enter practice in areas of need.*
- C. *A program component such as a preceptorship experience in an area of need, which will enhance the potential of training program graduates to practice in such an area.*

Yes ☒ No ☐

The following questions relate to Section III of the Training Program Standards:

- 1) Does the program have an established procedure to identify, recruit and match family practice residents who possess the following characteristics?
 - a) A predisposition to practice in areas of need? Yes ☒ No ☐
 - b) Who express a commitment to serve in areas of need? Yes ☒ No ☐
- 2) Check all applicable categories that describe the established procedure referenced in Section III of the Training Program Standards (above): (Minimum standard is to meet 4 of 9 categories)
 - (a) Mission statement speaks to graduate deployment Yes ☒ No ☐
 - (b) Website emphasizes underserved areas, populations Yes ☒ No ☐
The VCMC website states the residency program places an emphasis on educating family physicians to have the skills to work anywhere, especially with the medically underserved. The website also states that a highlight of the program is the diverse patient population: culturally, ethnically, educationally and socio-economically.
 - (c) Promotion of mission in interviews of residency applicants Yes ☒ No ☐
The program director stated that applicants must have an interest in full-spectrum family medicine and be interested in serving the patient population served by VCMC. Additionally applicants must be linguistically and culturally competent as well as be strong academically.
 - (d) Weighting of underserved goals affecting ranking of residents Yes ☒ No ☐
Applicants to the program that show a demonstrated commitment to working in a rural/underserved community and who are sensitive to the needs of the Latino patient population are ranked highly in the final rank list.
 - (e) Special emphasis on recruiting residents from areas of unmet need Yes ☒ No ☐
The residency program has a Minority Recruitment and Retention Committee comprised of residents dedicated to promoting diversity and cultural competence among medical professionals. The committee is open to any resident and believes in community empowerment as a way to improve the lives of their patients. The committee participates in health fairs at the local farmer's market, youth mentoring, and other ongoing recruitment efforts.
 - (f) Developing core faculty with experience in underserved practices
 Yes ☒ No ☐

- (g) Utilizing community physicians from underserved areas Yes ☒ No ☐
The program has approximately 20 participating community preceptors who rotate through 10 ½ day positions. These community preceptors are all board certified family physicians who are graduates of the VC program as well as graduates of other FP programs. Their individual practices are a mix of solo and group practices.
- (h) Offering preceptorships, clerkships to medical, pre-med students Yes ☒ No ☐
The program offers a 4th year Medical Student Externship, the experience can be catered to the interest of the student and usually combines a mixture of both inpatient and outpatient exposure.
- (i) Formally promoting medical careers in high schools, colleges Yes ☒ No ☐
For the past 20 years the program has offered The Summer Student Scholars Program, the program provides college students who have an interest in the health care field the opportunity to solidify their interest through a hands-on 8 week clinical and research opportunity at VCMC.
- 3) Does the program have an established counseling and placement program designed to encourage training program graduates to enter practice in areas of need?
- Yes ☒ No ☐
- 4) Check all applicable categories that describe the established counseling and placement program referenced in Section III of the Training Program Standards (above): (Minimum standard is to meet 1 of 5 categories)
- a) Faculty advisors/hospital management promote practice opportunities Yes ☒ No ☐
During the resident's second and third year they are individually and group counseled about practice opportunities. Residents are also invited to participate in a series of evening "Practice Selection and Mgmt." meetings held at the homes of Family Medicine faculty to discuss practice opportunities in unmet need areas.
- b) Supplementary assistance to graduate, family to locate in area Yes ☐ No ☒
- c) Coordination with NHSC federal/state loan repayment programs Yes ☒ No ☐
The program maintains a practice opportunities reference binder which emphasizes practices in medically underserved areas including Indian Health Service, migrant clinics and community health centers. Recruitment visits are also conducted by members of the National Health Services Corp.
- d) Coordination with community physicians in recruiting residents Yes ☒ No ☐
Prior VCMC graduates who are in practice outside of the county system come and speak to the residents regarding practice opportunities. Additionally, residents are visited by representatives from the County Health Care Agency who discuss practice opportunities within the county system.
- e) A program for the placement of family physicians in underserved areas
 Yes ☐ No ☒

The following are general questions relating to the administration of the Song-Brown program:

1. Do you have any concerns about any of the following processes established for the administration of the Song-Brown Act? If yes, please describe.
 - a) The applications for Song-Brown funds: Yes ☐ No ☒
 - b) The oral presentations to the Commission: Yes ☐ No ☒
 - c) The contract process: Yes ☐ No ☒
 - d) The invoice process: Yes ☐ No ☒
2. Is there any information about the residency program not covered by the above questions that should be noted or included with this site visit report?

When asked about their 2008 match, Dr. Dunlop stated that they had received 500 applications, offered 150 interviews, and chose 14 applicants. Dr. Dunlop stated they were successful in the match and he feels the trend towards Family Practice is on an upswing and the quality of the applicants is better.

Dr. Dunlop informed us that he will be stepping down as Program Director for the Ventura County Medical Center Family Medicine Residency Program as of 06/30/08. Dr. Leslie-Lynn Pawson will be acting Program Director until another is found. Dr. Dunlop is a former graduate of the VCMC Family Medicine Residency Program.